Fill in this information to identify your case.		Desc Main
	Document Fage 1 of 49	
United States Bankruptcy Court for the:		
Northern District of Illinois		
Case number (If known):	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing
		arrienued IIIIIO

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called *ajoint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
	Write the name that is on your	Zdzislaw				
	government-issued picture identification (for example, your driver's license or passport).	First name	First name			
		Middle name	Middle name			
	Bring your picture identification to	Kolach				
	your meeting with the trustee.	Last name	Last name			
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)			
2.	All other names you have used in the last 8 years					
	in the last 8 years	First name	First name			
	Include your married or maiden names.					
	names.	Middle name	Middle name			
		Last name	Last name			
		First name	First name			
		Middle name	Middle name			
		Last name	Last name			
3.	Only the last 4 digits of your	xxx-xx- <u>8</u> <u>6</u> <u>3</u> <u>8</u>	xxx - xx			
	Social Security number or federal Individual Taxpayer	 OR	OR			
	Identification number (ITIN)	9xx-xx	9xx - xx			

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:97994mber Descriment Page 2 of 49

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	☐ I have not used any business names or EINs.  Blackhawk Express Inc  Business name	☐ I have not used any business names or EINs.  Business name
	addiness de hantes	Business name	Business name
		2 7 - 1 2 2 7 3 6 5	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		8923 W. 93rd Pl. Number Street	Number Street
		Hickory Hills, IL 60457 City State ZIP Code	City State ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:	Check one:
	district to the for bankrupicy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408)

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:97994mber Description Page 3 of 49

Par	t 2: Tell the Court About Yo	ur Bankruptcy Case
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12  Chapter 13
8.	How you will pay the fee	<ul> <li>✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>
9.	Have you filed for bankruptcy within the last 8 years?	✓ No.         When Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓No.  Pess. Debtor Relationship to you District When Case number, if known  Debtor Relationship to you  District When Case number, if known
11.	Do you rent your residence?	<ul> <li>✓ No. Go to line 12.</li> <li>☐ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?</li> <li>☐ No. Go to line 12.</li> <li>☐ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.</li> </ul>

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:97994mber Description Page 4 of 49

Par	Part 3: Report About Any Businesses You Own as a Sole Proprietor						
		M No G	Go to Part 4.				
12.	Are you a sole proprietor of any full- or part-time business?	_	Name and location of busi	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	Name	-				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	Numb	er Street				-
		City			State	ZIP Code	-
		Chec	k the appropriate box to c	lescribe vour busir	ness:		
		_	Health Care Business (as	-			
			Single Asset Real Estate (			)	
			Stockbroker (as defined in	11 U.S.C. § 101(5	3A))		
			Commodity Broker (as defi	ned in 11 U.S.C. §	101(6))		
		☐ N	lone of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).	deadlines operations 11 U.S.C.  ✓ No.  No.  Yes.	If you indicate that you are, cash-flow statement, an § 1116(1)(B).  I am not filing under Chap Bankruptcy Code.  I am filing under Chap Code.	e a small business d federal income to hapter 11. oter 11, but I am No oter 11 and I am a s	debtor, you must ax return or if any o OT a small busine small business de	a small business debtor so the attach your most recent balar of these documents do not express debtor according to the debtor according to the definition	nce sheet, statement of ist, follow the procedure in efinition in the nin the Bankruptcy
14.	Do you own or have any	☑ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is the hazard?				
safety? Or do you own any property that needs immediate If immediate attention is needed, why is it needed? attention?							
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number St	reet		
				City		State	ZIP Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:		Abo	ut De	btor 2 (Spou	se Only in a Joint Case):
You must check on	۵٠	You	ı mus	t check one:	
I received a br	•				fing from an approved credit counseling e 180 before I filed this bankruptcy petition, certificate of completion.
	of the certificate and the payment plan, if eveloped with the agency.				the certificate and the payment plan, if veloped with the agency.
agency within	iefing from an approved credit counseling the 180 days before I filed this bankruptcy to not have a certificate of completion.		agei	ncy within th	fing from an approved credit counseling e 180 days before I filed this bankruptcy not have a certificate of completion.
	s after you file this bankruptcy petition, you ppy of the certificate and payment plan, if				after you file this bankruptcy petition, you y of the certificate and payment plan, if
approved ager during the 7 da	sked for credit counseling services from an ncy, but was unable to obtain those services nys after I made my request, and exigent merit a 30-day temporary waiver of the		app duri circ	roved agence ng the 7 days	ked for credit counseling services from an y, but was unable to obtain those services s after I made my request, and exigent nerit a 30-day temporary waiver of the
attach a separ to obtain the b before you file	n-day temporary waiver of the requirement, ate sheet explaining what efforts you made riefing, why you were unable to obtain it d for bankruptcy, and what exigent a required you to file this case.		atta to of befo	ch a separat btain the brid ere you filed	day temporary waiver of the requirement, e sheet explaining what efforts you made efing, why you were unable to obtain it for bankruptcy, and what exigent equired you to file this case.
	by be dismissed if the court is dissatisfied ons for not receiving a briefing before you uptcy.		with		be dismissed if the court is dissatisfied as for not receiving a briefing before you otcy.
receive a brie You must file along with a c	satisfied with your reasons, you must still fing within 30 days after you file. a certificate from the approved agency, opy of the payment plan you developed, if not do so, your case may be dismissed.		rece You alor	eive a briefir I must file a ng with a cop	atisfied with your reasons, you must still g within 30 days after you file. certificate from the approved agency, by of the payment plan you developed, if ot do so, your case may be dismissed.
Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		
I am not required to receive a briefing about credit counseling because of:				not require	d to receive a briefing about credit use of:
☐ Incapacit	y. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
Disability	My physical disability causes me to			Disability.	My physical disability causes me to

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

be unable to participate in a briefing

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:97994mber Description Page 6 of 49

Par	Part 6: Answer These Questions for Reporting Purposes						
16.	What kind of debts do you have?	16b.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  □ No. Go to line 16b.  ☑ Yes. Go to line 17.  Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  □ No. Go to line 16c. □ Yes. Go to line 17.  State the type of debts you owe that are not consumer debts or business debts.				
17.	Are you filing under Chapter 7 Do you estimate that after any exempt property is excluded and administrative expenses	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	are paid that funds will be available for distribution to unsecured creditors?		□ No □ Yes				
18.	How many creditors do you estimate that you owe?	<b>S</b>	1-49 50-99 100-199 200-999	_ _ _	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,000-100,000 More than 100,000
19.	How much do you estimate your assets to be worth?	<u> </u>	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	_ _ _	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much do you estimate your liabilities to be?  t 7: Sign Below	□ <b>3</b>	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Foi	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.    Ast Zdzislaw Kolach						

Case 17-02156 Doc 1 File O1/25/17 Entered 01/25/17 13:97594mber Description Page 7 of 49

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Anamaria F. Rivero	Date <b>01/24/2017</b>
Anamaria F. Rivero, Attorney	MM / DD / YYYY
Anamaria F. Rivero	
Printed name	
Thomas T. Boundas & Associates	
Firm name	
6428 Joliet Rd. Ste. 204	
Number Street	
Countryside	IL 60525
City	State ZIP Code
Contact phone	Email address <u>ariverolaw@gmail.com</u>
6302854	<u>Illinois</u>
Bar number	State

Fill in this informati	ion to identify your case	and triis filling:	<u> </u>		/17 13:17:54	Desc Main
Debtor 1	Zdzislaw First Name	Middle Name	Kolach  Last Name	Paye o 01 49		
Debtor 2 (Spouse, if filing) United States Bank	First Name	Middle Name	Last Name orthern District of Illinois			
Case number						☐ Check if this is an amended filing
n each category, se fits best. Be as con	e A/B: Prope	be items. List possible. If tw	vo married people are filing t	ogether, both are equa	ly responsible for sup	12/15 et in the category where you think it oplying correct information. If more nown). Answer every question.
Part 1: Descri	ibe Each Residence	e, Building	, Land, or Other Real E	state You Own or I	Have an Interest I	n
No. Go to In Yes. Where  1.1 Detache Street ad description  8923 W.  Hickory City	Part 2. e is the property? ed Single Family, 2 Stol dress, if available, or othe	ries	What is the property? Chec Single-family home Duplex or multi-unit build Condominium or coopera Manufactured or mobile in Land Investment property Timeshare Other Who has an interest in the Debtor 1 only	ck all that apply. ling tive nome	Do not deduct sect amount of any sect Creditors Who Hase Current value of the entire property? \$437,60  Describe the nature	portion you own?
Cook County			☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 or ☐ At least one of the debtors	•	Check if this is (see instructions	community property s)
you have attac			of your entries from Part 1, ere		or pages 	<b>→</b> \$218,801.50
Do you own, lease			n any vehicles, whether they also report it on Schedule G: I	-	•	

□ No
☑ Yes

Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

<u>Çaşe</u> 17-02156 File 01/25/17 Debtor 1 Page 9 of 49 Middle Name **GMC** Who has an interest in the property? Check one. 3.1 Make: Do not deduct secured claims or exemptions. Put the Debtor 1 only amount of any secured claims on Schedule D: Envoy Model: Debtor 2 only Creditors Who Have Claims Secured by Property. 2002 Debtor 1 and Debtor 2 only Current value of the Current value of the Year: At least one of the debtors and another entire property? portion you own? 170000 Approximate mileage: \$1,268.00 Check if this is community property (see Other information: instructions) If you own or have more than one, list here: 3.2 Make: Who has an interest in the property? Check one. Mazda Do not deduct secured claims or exemptions. Put the Debtor 1 only amount of any secured claims on Schedule D: **X5** Model: Debtor 2 only Creditors Who Have Claims Secured by Property. Debtor 1 and Debtor 2 only 2015 Current value of the Current value of the Year: At least one of the debtors and another entire property? portion you own? 26,000 Approximate mileage: \$11,000.00 \$11,000.00 ☐ Check if this is community property (see Other information: instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **✓** No ☐ Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$12,268,00 you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Household goods and furnishings Yes. Describe...... \$950.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No Electronics \$250.00 Yes. Describe......

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Do	o you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	rt 4: Describe Your Financial Assets	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here→	\$3,350.00
14.	Any other personal and household items you did not already list, including any health aids you did not list  Volume  Ves. Describe	
	Examples: Dogs, cats, birds, horses  ✓ No  ☐ Yes. Describe	
13.		
12.	Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver  ✓ No  ☐ Yes. Describe	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No Yes. Describe	\$1,600.00
11.	✓ No ☐ Yes. Describe  Clothes	
10.	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments  No Yes. Describe  Bike and hockey equipment	\$550.00
9.	Equipment for sports and hobbies  Examples: Sports photographic exercise and other hobby equipment; higgeles pool tables golf clubs skis; cances and kayaks;	
	stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  Volume No Ves. Describe	
8.	Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	

Official Form 106A/B Schedule A/B: Property page 3

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: Page 11 of 49

16.	Cash			
		ve in your wallet, in your home, in a	safe deposit box, and on hand when you file your petition	
	<b>√</b> No		Cash	
17.		rings, or other financial accounts; or ons. If you have multiple accounts v	ertificates of deposit; shares in credit unions, brokerage houses, and othe with the same institution, list each.	r
	☐ No ☑ Yes			
			Institution name:	
	1	7.1. Checking account:	BMO Harris Bank NA	\$100.00
	1	7.2. Checking account:		
	1	7.3. Savings account:		
	1	7.4. Savings account:		
	1	7.5. Certificates of deposit:		
	1	7.6. Other financial account:		
	1	7.7. Other financial account:		
	1	7.8. Other financial account:		
	1	7.9. Other financial account:		
18.	Bonds, mutual funds, or p  Examples: Bond funds, in  No Yes	publicly traded stocks vestment accounts with brokerage f	firms, money market accounts	
19.			nd unincorporated businesses, including an interest in	
	✓ No ☐ Yes. Give specific information about them			
20.	Negotiable instruments incl		nd non-negotiable instruments cks, promissory notes, and money orders. comeone by signing or delivering them.	
	✓ No ☐ Yes. Give specific information about them			

21.	Retirement or pension accounts					
		01(k), 403(b), thrift savings accounts, or other pension or profit-s	haring plans			
	<b>☑</b> No					
	Yes. List each account separately.					
22.	Security deposits and prepayments					
		e so that you may continue service or use from a company				
		rent, public utilities (electric, gas, water), telecommunications cor	npanies, or			
	others					
	☑ No					
	☐ Yes					
23.	Annuities (A contract for a periodic payment of	money to you, either for life or for a number of years)				
	<b>☑</b> No					
	☐ Yes					
24.	Interests in an education IRA, in an account	in a qualified ABLE program, or under a qualified state tuition	program.			
	26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1)	).				
	<b>☑</b> No					
	☐ Yes					
25.	Trusts, equitable or future interests in proper	rty (other than anything listed in line 1), and rights or powers e	xercisable for your			
	benefit					
	<b>☑</b> No					
	Yes. Give specific information about them					
	iniomation about them					
26.	Patents, copyrights, trademarks, trade secret	ts, and other intellectual property				
		proceeds from royalties and licensing agreements				
	√ No	, , , , , , , , , , , , , , , , , , , ,				
	Yes. Give specific					
	information about them					
27	Licenses franchises and other general internal	aribles.				
21.	Licenses, franchises, and other general intan	es, cooperative association holdings, liquor licenses,				
	professional licenses	es, cooperative association notalings, liquol licenses,				
	<b>☑</b> No					
	Yes. Give specific					
	information about them					
28.	Tax refunds owed to you					
	•					
	No Yes. Give specific information about	2016   2016 refund state and foderal, if any	Fodovoli			
	them, including whether you	2016   2016 refund state and federal, if any	Federal: \$0.00			
	already filed the returns and the tax years	2016   2016 refund state and federal, if any	State: <b>\$0.00</b>			
			Local: <b>\$0.00</b>			
29.	Family support					
	Examples: Past due or lump sum alimony, spo	ousal support, child support, maintenance, divorce settlement, prop	perty settlement			

	That Name Middle N	Last Name 3	
	✓ No ☐ Yes. Give specific information		
	·	Alimony:	
		Maintenance:	
		Support:	·
		Divorce settlement:	
		Property settlement:	
30.	Other amounts someone owes you		
	Examples: Unpaid wages, disability insuran Security benefits; unpaid loans you	ce payments, disability benefits, sick pay, vacation pay, workers' compensation, Social bu made to someone else	
	Yes. Give specific information		
	·		
31.	Interests in insurance policies		
		e; health savings account (HSA); credit, homeowner's, or renter's insurance	
	<b>☑</b> No		
	Yes. Name the insurance company of each policy and list its value		
32.	Any interest in property that is due you from		
	because someone has died.	ect proceeds from a life insurance policy, or are currently entitled to receive property	
	<b>☑</b> No		
	Yes. Give specific information		
33.		t you have filed a lawsuit or made a demand for payment	
	Examples: Accidents, employment disputes   ✓ No	s, insurance claims, or rights to sue	
	Yes. Describe each claim		
34.	Other contingent and unliquidated claims to set off claims	of every nature, including counterclaims of the debtor and rights	
	<b>☑</b> No		
	Yes. Describe each claim		
25	Any financial coasts you did not also the Pot		
35.	Any financial assets you did not already list		
	✓ No ☐ Yes. Give specific information		
	res. Give specific information		
36.		om Part 4, including any entries for pages you have attached	
	for Part 4. Write that number here	<b>→</b>	\$100.00

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First Name	Mid	dle Name	Dogungent	Page 14 of 49	

	rt 5: Describe Any Business-Related Property You Own or Have an Interes	,
7.	Do you own or have any legal or equitable interest in any business-related property?  ✓ No. Go to Part 6.	
	Yes. Go to line 38.	
3.	Accounts receivable or commissions you already earned	
	□ No	
	Yes. Describe	
9.	Office equipment, furnishings, and supplies	
,.	Examples: Business-related computers, software, modems, printers, copiers, fax machines, ruç	gs, telephones, desks, chairs, electronic devices
	□ No	
	Yes. Describe	
).	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	□ No	
	Yes. Describe	
4	lavontoni	
١.	Inventory  No	
	Yes. Describe	
2.	Interests in partnerships or joint ventures	
	☐ No ☐ Yes. Describe	
	Name of entity:	% of ownership:
		%
		%
		%
	Customer lists, mailing lists, or other compilations	
3.	□ No	
3.		1(41A))?
3.	Yes. <b>Do your lists include personally identifiable information</b> (as defined in 11 U.S.C. § 10	01(41A))?
3.	Tes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 10	01(41A))? 
	Yes. <b>Do your lists include personally identifiable information</b> (as defined in 11 U.S.C. § 10	01(41A))? 
	Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 10  No Yes. Describe  Any business-related property you did not already list  No	01(41A))? 
	Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 10  No Yes. Describe	01(41A))? 

Debt	tor 1 Question 1 First Nam	7-02156	Doc 1	Fileg 91/25/17 Dogument	Entered 01/25/17 Page 15 of 49	13:939:54 <sup>mbe</sup> Des	™Main ———
45.		-			for pages you have attached	→	
Par	t 6: Describe Any F				erty You Own or Have ar	ı Interest In.	
46.	Do you own or have ar  ✓ No. Go to Part 7.  ☐ Yes. Go to line 47.	ny legal or equita	ble interest in	any farm- or commerc	cial fishing-related property?		
47.	Farm animals  Examples: Livestock,    No  Yes	ooultry, farm-raise	ed fish				
48.	Crops—either growin  No Yes. Give specific information	g or harvested					
49.	Farm and fishing equip  No Yes	oment, impleme	nts, machinery	, fixtures, and tools of	f trade		
50.	Farm and fishing supp  No Yes	lies, chemicals,	and feed				
51.	Any farm- and commer  No Yes. Give specific information	cial fishing-relat	ed property yo	ou did not already list			
52.		-			for pages you have attached	→	

Ģ	ase 17-0215	6 Doc 1	Filed 01/25/17	Entered 01/25/17 13:97:54mber 1968cm Main
F	irst Name	Middle Name	Dogungent	Page 16 of 49 —————

Par	Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above							
53.	Do you have other property of any kind you did not already lise  Examples: Season tickets, country club membership  ✓ No  ☐ Yes. Give specific information	t?						
	Add the dollar value of all of your entries from Part 7. Write that number here							
55.	Part 1: Total real estate, line 2		→	\$218,801.50				
56.	Part 2: Total vehicles, line 5	\$12,268.00						
57.	Part 3: Total personal and household items, line 15	\$3,350.00						
58.	Part 4: Total financial assets, line 36	\$100.00						
59.	Part 5: Total business-related property, line 45	\$0.00						
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00						
61.	Part 7: Total other property not listed, line 54	+\$0.00						
62.	Total personal property. Add lines 56 through 61	\$15,718.00	Copy personal property total →	+ \$15,718.00				
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$234,519.50				

Fill in this informa	ation to identify your ca	Se:			5/17 13:17:54	Desc Main
	, ,		Documer	nı Paye 17 01	49	
Debtor 1	Zdzislaw		Kolach		_	
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	North	nern District of III	linois		
Case number						
(if known)						Check if this is an amended filing
Be as complete a property you liste attach to this page. For each item of exempt. Alternative exemptions—suctain an exempti	and accurate as possiled on Schedule A/B: It is as many copies of It is property you claim as vely, you may claim the chas those for health	ole. If two married peroperty (Official For Part 2: Additional Part 2:	eople are filing to rm 106A/B) as you age as necessary. specify the amour lue of the propert sive certain benef aw that limits the	ur source, list the property On the top of any addition Int of the exemption you cle Ity being exempted up to the Itis, and tax-exempt retire It exemption to a particular	esponsible for supplying o y that you claim as exempt nal pages, write your name laim. One way of doing so i he amount of any applicab ement funds—may be unli	correct information. Using the it. If more space is needed, fill out and and case number (if known). is to state a specific dollar amount as ale statutory limit. Some mitted in dollar amount. However, if y lue of the property is determined to
Part 1: Iden	tify the Property	You Claim as Ex	empt			
1. Which set o	f exemptions are you	claiming? Check or	ne only, even if you	ur spouse is filing with you.		
☑ You are o	claiming state and feder	al nonbankruptcy exe	emptions. 11 U.S.(	C. § 522(b)(3)		
You are	claiming federal exemp	tions. 11 U.S.C. § 52	2(b)(2)			
2. For any prop	perty you list on Sche	dule A/B that you cla	aim as exempt, fil	II in the information below	<i>ı</i> .	
	otion of the property a B that lists this prope		nt value of the on you own	Amount of the exemp	otion you claim Spec	cific laws that allow exemption
			the value from dule A/B	Check only one box for	r each exemption.	
	Detached Single 2 Stories		\$218,801.50	<b>√</b> \$15,000	0.00 735	ILCS 5/12-901

100% of fair market value, up to any

100% of fair market value, up to any

100% of fair market value, up to any

735 ILCS 5/12-1001(c)

735 ILCS 5/12-1001(b)

applicable statutory limit

applicable statutory limit

applicable statutory limit

Brief

Brief

Brief

description:

description:

Schedule A/B:

description:

Schedule A/B:

Line from

**✓** No

☐ No☐ Yes

Line from

Line from Schedule A/B:

8923 W. 93rd Pl. Hickory

Hills, IL 60457

2002 GMC Envoy

Household goods and

3. Are you claiming a homestead exemption of more than \$160,375?

furnishings

1.1

3.1

\$1,268.00

\$950.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Gase 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: Page 18 of 49

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B	e from Check only one box for each exemption.		Specific laws that allow exemption	
Brief description: Line from Schedule A/B:	Electronics 7	\$250.00	<b>□</b> .	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Brief description: Line from Schedule A/B:	Bike and hockey equipment	\$550.00	□ . ☑	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Brief description: Line from Schedule A/B:	Clothes 11	\$1,600.00	□ . ☑	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)	
			□ . <b>☑</b>	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Brief description: Line from Schedule A/B:	BMO Harris Bank NA Checking account	\$100.00	<b>□</b> .	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Brief description: Line from Schedule A/B:	2016 refund state and federal, if any FederalTax	<u>unknown</u>	<b>□</b> .	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
Brief description: Line from Schedule A/B:	2016 refund state and federal, if any StateTax	<u>unknown</u>	<b>□</b> .	100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	

	4= 004		='		F/47 40.47.F4	Dana Main	
Fill in this informati	on to identify your cas	e.			5/17 13:17:54	Desc Main	
Dahtand	7.1-1-1		Document	Page 19 01 49			
Debtor 1	Zdzislaw First Name	Middle Name	Kolach Last Name				
	1 list Name	Middle Hame	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bank	cruptcy Court for the:	North	ern District of Illinois	<u> </u>			
Case number (if known)				_		Check if this is an amended filing	í
Official For		ors Who I	Have Clair	ns Secured	hy Propert	V	12/15
				er, both are equally respo this form. On the top of a			
. Do any creditors	have claims secured	by your property?					
☐ No. Check thi	s box and submit this	form to the court with	your other schedules.	. You have nothing else to	report on this form.		
☑Yes. Fill in all	of the information belo	DW.					
Dort 1: List A	II Secured Claims	_					
				creditor separately for each		Column B	Column C
	n alphabetical order a			Part 2. As much as possi	7 mileum of claim	Value of collateral that	Unsecured portion
	a.pa.ooa. o.ao. a	ocorag to the orea			Do not deduct the value of collateral.	supports this	If any
						claim	,
2.1 BMO Harris B		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	be the property that s		\$371,366.	27 \$218,801.50	\$0.00
Creditor's Name			ned Single Family, 2 St /. 93rd Pl. Hickory Hills				
PO Box 94033 Number	Street			•			
rumbor	0.1001		•	laim is: Check all that app	ıy.		
		<b>☑</b> Con	· ·				
Palatine, IL 60 City		ZIP Code —	quidated				
- 7	e debt? Check one.	☐ Disp	outed				
Debtor 1 or		Nature	of lien. Check all that	apply.			
Debtor 2 only			agreement you made ( ured car loan)	(such as mortgage or			
	nd Debtor 2 only	□Stat	utory lien (such as tax	lien, mechanic's lien)			
✓ At least one of the debtors and another —		gment lien from a laws	,				
Check if th community	is claim relates to a	_ `	er (including a right to		_		
Date debt was December 23,	incurred	Last 4	digits of account nur	mber <u>8 4 9 8</u>			

Remarks: Foreclosure pending

Add the dollar value of your entries in Column A on this page. Write that number here:

\$371,366.27

Gase 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: 97.534 Main First Name Middle Name Document Page 20 of 49

Part 1: Additional Page After listing any entries on with 2.3, followed by 2.4, a	this page, number them beginning and so forth.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any		
2.2 Oblazny, Stanley Creditor's Name 9020 Christina Dr Number Street  Hickory Hills, IL 60457 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred March 12, 2011  2.3 Chase Auto Creditor's Name PO Box 901003 Number Street  Ft Worth, TX 76101 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred March 12, 2011	Describe the property that secures the claim:  Detached Single Family, 2 Stories 8923 W. 93rd Pl. Hickory Hills, IL 60457  As of the date you file, the claim is: Check all that apply.  Contigent  Unlquidated  Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)  Last 4 digits of account number	\$32,062.00 \$12,399.00	\$218,801.50			
•	Add the dollar value of your entries in Column A on this page. Write that number here:  If this is the last page of your form, add the dollar value totals from all pages. Write that number					

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:17:54 Desc Main Zdzisław December Page 21 of 49

First Name

Middle Name

Last Name

to co	ollect from yo	ou for a debt you owe to se	omeone else, list the cre	ditor in Part 1, an	of that you already listed in Part 1. For example, if a collection agency is trying and then list the collection agency here. Similarly, if you have more than one re. If you do not have additional persons to be notified for any debts in Part 1,		
1	Codilis & A	ssociates PC			On which line in Part 1 did you enter the creditor? 1		
	Name	330010103 1 0			Last 4 digits of account number		
		Frontage Rd Ste 100			Last 4 digits of account number		
	Number	Street					
					_		
	Burr Ridge	. IL 60527					
	City	,	State	ZIP Code	_		
					On which line in Part 1 did you enter the creditor?		
	Name				Last 4 digits of account number		
	Number	Chroat			_		
	Number	Street					
					<del>_</del>		
					_		
	City		State	ZIP Code			
					On which line in Part 1 did you enter the creditor?		
	Name						
	Ivaille				Last 4 digits of account number		
	Number	Street			_		
					_		
	0		0	710.0	_		
	City		State	ZIP Code			
					On which line in Part 1 did you enter the creditor?		
	Name						
					Last 4 digits of account number		
	Number	Street			_		
	City		State	ZIP Code	<del>_</del>		
	City		State	Zii Code			
					On which line in Part 1 did you enter the creditor?		
	Name				Last 4 digits of account number		
	Number	Street					
					_		
	City		State	ZIP Code	_		
					On which line in Part 1 did you enter the creditor?		
	Name				 Last 4 digits of account number		
					_		
	Number	Street					
					_		
	City		State	ZIP Code	_		

	47.004				25/17 13:17:54	Dos	sc Main	
Fill in this informat	ion to identify your case		Document	Page ZZ UI 48	.5/17 15.17.54	Des	sc main	
Debtor 1	Zdzislaw		Kolach	3				
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Ban	kruptcy Court for the:	Northern	District of Illinois					
Casa numbar								
Case number (if known)				_		_	heck if this is a	n
· · · · · ·						an	nended filing	
Official Fo	rm 106E/F							
Official 1 0	1111 100 <u>L/1</u>							
Schedule	e E/F: Cred	itors Who	Have Uns	secured Cla	aims			12/15
any executory con	tracts or unexpired lea	ses that could result i	n a claim. Also list e	xecutory contracts on	reditors with NONPRIC Schedule A/B: Proper	ty (Offici	al Form 106A/	B) and on
					ors with partially secur ill it out, number the er			
		• •		name and case numb	•			
Part 1: List A	II of Your PRIORI	TY Unsecured Cla	nims					
1 Do any crodi	tors have priority unse	ocured claims against	vou?					
No. Go to		ecured ciaims against	you?					
identify what t possible, list the Part 1. If more	ype of claim it is. If a cla	aim has both priority an al order according to th ds a particular claim, lis	d nonpriority amounts e creditor's name. If y t the other creditors i	s, list that claim here and you have more than two n Part 3.	the creditor separately f I show both priority and priority unsecured clair	nonpriori	ty amounts. As	much as
					Total c	laim	Priority amount	Nonpriority amount
2.1 Kolach fk	a Chramiec, Jadwiga		Last 4 digits of ac	count number				
Priority Cred	ditor's Name		•					
8923 W. 9			When was the dek	ot incurred? file, the claim is: Chec	k all that			
Number	Street		apply.	ille, trie Claim is. Oneo	k ali tilat			
			Contingent					
Hickory H City	ill <b>s, IL 60457</b> Sta	ate ZIP Code	✓ Unliquidated ✓ Disputed					
•	red the debt? Check of		<b>Disputcu</b>					
☐ Debtor			Type of PRIORITY  ✓ Domestic supp					
Debtor	2 only			ain other debts you owe	the			
,	1 and Debtor 2 only		government	an other debte year evve	uio			
	t one of the debtors and			th or personal injury whi	le you were			
	if this claim is for a co	ommunity debt	intoxicated  Other. Specify					
Is the clain ✓ No	n subject to offset?		Utiler. Specify					
☐ Yes								
	Wife has pending petition	on for temporary						
	d maintenance pending							
information	and belief, wife may se	ek retroactive						
obligation. I	las not been ruled upo	n yet by court.						

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:17:54 Desc Main <u>Zdzislaw</u> <u>Page 23 of 49</u> Debtor 1 First Name Middle Name Last Name

Part	2: List All of Your NONPRIORITY Unsecured Clair	ms	
[	Do any creditors have nonpriority unsecured claims against you  No. You have nothing to report in this part. Submit this form to the Yes.		
t t	insecured claim, list the creditor separately for each claim. For each	order of the creditor who holds each claim. If a creditor has more than on holds holds listed, identify what type of claim it is. Do not list claims already increased and a listed, increased than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
			Total claim
4.1	Chase Credit Card	Lost 4 digits of account number	\$12,940.00
	Nonpriority Creditor's Name	Last 4 digits of account number	
	PO Box 15298	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.  Contingent	
		Unliquidated	
	Wilmington, DE 19850 City State ZIP Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims	
	At least one of the debtors and another	<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
	☐ Check if this claim is for a community debt	✓ Other. Specify	
	Is the claim subject to offset?	Credit Card	
	<b>☑</b> No		
	Yes		
4.2	Chase Credit Card	Last 4 digits of account number	\$4,789.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 15298	As of the date you file, the claim is: Check all that apply.	
	Number Street	☐ Contingent	
	Wilmington DE 10950	Unliquidated	
	Wilmington, DE 19850 City State ZIP Code	- ☑ Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	☐ Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
	At least one of the debtors and another	similar debts	
	☐ Check if this claim is for a community debt	☑ Other. Specify	
	Is the claim subject to offset?	Credit Card	
	<b>☑</b> No		
	Yes		•
4.3	Sears/CBNA	Last 4 digits of account number	\$1,763.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 6283  Number Street	As of the date you file, the claim is: Check all that apply.	
	Trained Street	☐ Contingent	
	Sioux Falls, SD 57117	Unliquidated	
	City State ZIP Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	☐ Student loans	
	Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other	
	At least one of the debtors and another	similar debts	
	☐ Check if this claim is for a community debt	☑ Other. Specify  Credit Card	
	Is the claim subject to offset?	Siddle Said	
	☑ No		

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:17:54 Desc Main <u>Zdzislaw Docalament Page 24 of 49</u>

Eirst Name Middle Name Last Name

2: Your NONPRIORITY Unsecured Claims - Corrlisting any entries on this page, number them beginning	· ·	Total claim
TMobiile Nonpriority Creditor's Name Po Box 742596 Number Street  Cincinnati, OH 45274-2596 City State ZIP Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Cell Phone	Total claim \$600.
U.S. Department of Education  Nonpriority Creditor's Name  400 Maryland Avenue, SW  Number Street  Washington, DC 20202  City State ZIP Code  Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No	Last 4 digits of account number 8581  When was the debt incurred? 10, 2015  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  Disputed  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Student Loan	<u>\$31,739.</u>

Part 3:

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:17:54 Desc Main <u>Zdzislaw</u> <u>Docolatinent</u> <u>Page 25 of 49</u>

First Name Middle Name Last Name

List Others to Be Notified About a Debt That You Already Listed

<u> </u>
Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims  2 Part 2: Creditors with Nonpriority Unsecured Claims
' '
Last 4 digits of account number 8581
240
ode
One which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.5 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number 8581
ode Ode
One which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
ode
,
One which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
ode
One which entry in Part 1 or Part 2 did you list the original creditor?
One which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
<u> </u>
ode
One which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
<del></del> ode
One which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number

Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13:17:54 Desc Main <u>Zdzislaw</u> <u>Page 26 of 49</u>

First Name

Middle Name

Last Name

6. Total the an	the Amounts for Each Type of Unsecured Claim mounts of certain types of unsecured claims. This informati ecured claim.	on is for stat	istical reporting purposes only. 28 U.S.C. §159. Add the amounts for ea
			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
rom Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00_
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$0.00_
			Total claim
otal claims	6f. Student loans	6f.	\$31,739.00
rom Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>-</b>	\$20,092.00
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$51,831.00

Fill in this informat	ion to identify your cas	e:			25/17 1	.3:17:54	Desc Main
			Document	Page 27 (	л <del>4</del> 9		
Debtor 1	Zdzislaw		Kolach				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Ban	kruptcy Court for the:	Nort	hern District of Illinois				
Case number				_			☐Check if this is an
(if known)							amended filing
O#:=:=! <b>-</b> -	1000						· ·
Official Fo	m iuoG						

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - ☑No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent. vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom y	ou have	e the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
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2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

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Fill in this informat	ion to identify your cas	e.	Document	Page 28 01 4	25/17 13:17:54 b	Desc Main
Debtor 1	Zdzislaw		Kolach	1 age 20 01 4		
	First Name	Middle Name	Last Name	_		
Debtor 2						
Spouse, if filing)	First Name	Middle Name	Last Name			
Jnited States Ban	kruptcy Court for the:	North	ern District of Illinois			
Case number						
if known)				_		☐ Check if this is an amended filing
					1	anended liling
Official Fo	orm 106H					
Schedul	e H: Your (	Codebtors	S			12/15
ooth are equally r	esponsible for supply	ing correct inform	ation. If more space is	needed, copy the Add	itional Page, fill it out, and	married people are filing together, I number the entries in the boxes on i). Answer every question.
1 Do you have	any codebtors? (If yo	u are filing a joint ca	se, do not list either spo	use as a codebtor )		
□ No	any couchierer (ii ye	a aro ming a joint oa	iso, do not not out of ope	add ad a ddaddion.		
<b>✓</b> Yes						
<del></del>	st 8 vears, have you li	ved in a communit	v property state or terri	tory? (Community proj	perty states and territories in	nclude Arizona, California, Idaho,
	•		ashington, and Wiscons	• • • • • • • • • • • • • • • • • • • •	orly states and territories in	roidad / wizoria, Gamerriia, radire,
☑ No. Go to	line 3.					
Yes. Did y	our spouse, former spo	ouse, or legal equiva	lent live with you at the t	ime?		
□No						
☐Yes. In	which community state	e or territory did you	live?	Fill ir	the name and current add	dress of that person.
Name						
Numbe	er Street			_		
	or order					
City		State ZIP Co	ode			
						erson shown in line 2 again as a
			er. Make sure you have se Schedule D, Schedu			n 106D), Schedule E/F (Official
Column 1: <b>Yo</b>	, ,	,	,			hom you guya tha daht
Column 1: 10	ur codeptor			C	Check all schedules that a	•
					Check all schedules that a	рріу:
	hramiec, Jadwiga				Schedule D, line	
Name 8923 W. 93rd	1 PI				Schedule E/F, line 4.4,	, 4.3
Number S	Street			_	Schedule G, line	
Hickory Hills City	, IL 60457 Sta	ate ZIP Code				
	Sic	ac Zii Coue			<b>□1</b> 0 · · · · = · · · ·	
Kolach, Jady	viga				Schedule D, line 2.1	
Name 8923 W. 93rd	d Pl.				Schedule E/F, line	
Number S	Street				Schedule G, line	<u> </u>
Hickory Hills City	, IL 60457 Sta	ate ZIP Code				
Oity	Old	211 0000				

Schedule D, line \_

Schedule E/F, line \_\_\_\_\_

3.3

Name

Number

City

Street

State

ZIP Code

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Fill	in this informati	on to identify your ca		писти т	au	C 23 OI		L3.17.32	+ Desc	iviaiii	
De	btor 1	Zdzislaw	Kolach		3						
	-	First Name	Middle Name Last N	ame			_				
De	btor 2										
(Sp	oouse, if filing)	First Name	Middle Name Last N	ame				_	eck if this is:		
Un	ited States Bank	cruptcy Court for the:	Northern Distric	t of Illinois				_	An amended fi	Ū	
	se number _								A supplement chapter 13 inco		ostpetition he following date
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<b>U</b> t	ficial For	m 1061									
Sc	chedule	: I: Your In	ncome								12/15
spo addi	use is not filing itional pages, w	with you, do not inc	t filing jointly, and your spouse clude information about your s case number (if known). Answe	pouse. If more	spac						
1.	Fill in your em	ployment		Debtor 1				-	Debtor 2 or no	n-filing en	OUSA
	information.									ii-iiiiig sp	
	If you have mo	•	Employment status	☐ Employed				_	nployed		
	attach a separa information abo			Not Employe	ed			<b>₹</b> No	ot Employed		
	employers.	out addition id:	Occupation								
	Include part tin	ne, seasonal, or	Occupation								
	self-employed	work.	Employer's name								
		ay include student	Employer's address	<u> </u>					. 0:		
	or homemaker	, if it applies.		Number Street				Num	ber Street		
				City		State	Zip Code	City		State	Zip Code
			How long employed there?								
Pa	art 2: Give D	Details About Mo	onthly Income								
	Estimate mon	thly income as of th	e date you file this form. If you l	have nothing to r	epor	t for any line	e, write \$0 in th	ne space. In	clude vour non	-filina spou	se unless vou
	are separated.	,	<b>,</b> ,				.,			9	
		on-filing spouse have ate sheet to this form.	e more than one employer, combi	ne the informatio	n for	all employe	rs for that pers	son on the li	nes below. If yo	ou need mo	ore space,
						For	r Debtor 1		otor 2 or ng spouse		
2	Liet monthly	roce wages color: a	and commissions (hefers all se	roll						_	
۷.			and commissions (before all pay culate what the monthly wage wou		2.		\$0.00		\$0.00		
3.	Estimate and	list monthly overtim	e pay.		3.	+	\$0.00	+	\$0.00		

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

Gase 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: Page 30 of 49

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$0.00	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$0.00	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	5h.	+ \$0.00	+\$0.00	
6.	Add the payroll deductions.	6.	\$0.00	\$0.00	
0.	Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	0.	φυ.ου_	φο.σο_	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00	
8.	List all other income regularly recieved:				
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$4,666.67	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	OD.	φυ.σο	φυ.υυ_	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00_	
	8f. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+\$0.00	
	Cposily.			,	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$4,666.67	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$4,666.67	+ \$0.00	\$4,666.67
11.	State all other regular contributions to the expenses that you list in Schedule	J.			
	Include contributions from an unmarried partner, members of your household, your of friends or relatives.	depende	ents, your roommates, a	nd other	
	Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	to pay expenses listed	in <i>Schedule J</i> .	
	Specify:			11. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The resu		•	me. Write that	
	amount on the Summary of Your Assets and Liabilities and Certain Statistical Inform	<i>nation</i> , if	f it applies	12.	\$4,666.67
					Combined
40	Do you expect on increase or decrease within the year offer year file this form				monthly income
13.	Do you expect an increase or decrease within the year after you file this form? ✓ No.				
	Yes. Explain:				
	Too. Expiairi.				

Fill	in this information	on to identify your case	Document	25/17 1 Page 31 01 49	13:17:54 De	sc Main
De	ebtor 1	Zdzislaw	Kolach	1 age 01 01 40		
		First Name	Middle Name Last Name	Check	if this is:	
	ebtor 2				amended filing	
٠.	oouse, if filing)	First Name	Middle Name Last Name		upplement showing poor the following date:	ostpetition chapter 13 expenses
		ruptcy Court for the: _	Northern District of Illino		/ DD / YYYY	
	se number known)				, 55, 1111	
Of	ficial For	m 106J				
		: J: Your Ex	/nansas			40/45
			. If two married people are filing toget	her hoth are equally responsible fo	or supplying correct i	12/15
			. On the top of any additional pages, \			
Pa	art 1: Descri	be Your Househol	d			
1.	Is this a joint o	case?				
	✓ No. Go to li					
	_	Debtor 2 live in a sepa	rate household?			
	□Y	es. Debtor 2 must file C	Official Form 106J-2, Expenses for Sepa	arate Household of Debtor 2.		
2.	Do you have o	-	□No	Daman dantla valationahin ta	Danamalantia	Daga daman dant liva
	Do not list Deb Debtor 2.	itor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the	e dependents' names.	саст асрепаста			No.
				Child	16	Yes.
				Child	18	✓ Yes.
				Child	20	No. ✓ Yes.
						■No
						Yes No
				_	_	Yes
3.		nses include expenses er than yourself and nts?	<b>☑</b> No □ Yes			
	year aeperiae					
Pa	art 2: Estim	ate Your Ongoing	Monthly Expenses			
			ruptcy filing date unless you are using			ort expenses as of a date after
the	e bankruptcy is	filed. If this is a supple	emental Schedule J, check the box at	the top of the form and fill in the ap	oplicable date.	
			n government assistance if you know n Schedule I: Your Income (Official Fo		Youi	expenses
4.	The rental or h ground or lot.	nome ownership exper	nses for your residence. Include first me	ortgage payments and any rent for th	e 4	\$6,003.64
	If not included	d in line 4:				
	4a. Real estate				4a.	\$0.00
		omeowner's, or renter's	insurance		4b	\$71.66
		tenance, repair, and up			4c.	\$35.00

4d. Homeowner's association or condominium dues

4d.

\$0.00

Gase 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: Pres Name Name Document Page 32 of 49

	You	ur expenses
Additional mortgage payments for your residence, such as home equity loans	5	
5. Utilities:		
6a. Electricity, heat, natural gas	6a	\$140.00
6b. Water, sewer, garbage collection	6b	\$100.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$410.0
6d. Other. Specify:	6d.	\$0.00
7. Food and housekeeping supplies	7.	\$400.00
Childcare and children's education costs	8.	\$0.00
Clothing, laundry, and dry cleaning	9.	\$0.00
Personal care products and services	10.	\$27.00
Medical and dental expenses	11.	\$105.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12.	\$105.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
4. Charitable contributions and religious donations	14.	\$0.00
<ol> <li>Insurance.</li> <li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li> </ol>		
15a. Life insurance	15a	\$0.00
15b. Health insurance	15b.	\$0.00
15c. Vehicle insurance	15c	\$0.00
15d. Other insurance. Specify:	15d.	\$0.00
<ol> <li>Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.</li> <li>Specify: On K1 business income</li> </ol>	16.	\$1,180.25
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$437.00
17b. Car payments for Vehicle 2	17b	
17c. Other. Specify:	17c	
17d. Other. Specify:	17d	
<ol> <li>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</li> </ol>	18.	\$0.00
9. Other payments you make to support others who do not live with you.  Specify:	19.	\$0.00
0. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1 Gase 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: 97.534 Main First Name Middle Name Document Page 33 of 49

21.	Other. Spec	cify:	21.	+\$0.00
22.	Calculate y	our monthly expenses.		
	22a. Add lin	nes 4 through 21.	22a.	\$9,014.55
	22b. Copy li	ine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$0.00
	22c. Add lin	ne 22a and 22b. The result is your monthly expenses.	22c.	\$9,014.55
23.	Calculate y	our monthly net income.		
	23a. Copy li	ine 12 (your combined monthly income) from Schedule I.	23a.	\$4,666.67
	23b. Copy y	your monthly expenses from line 22c above.	23b.	<b>-</b> \$9,014.55_
		ct your monthly expenses from your monthly income. esult is your <i>monthly net income</i> .	23c.	(\$4,347.88)
24.	Do you exp	pect an increase or decrease in your expenses within the year after you file this form?		
		e, do you expect to finish paying for your car loan within the year or do you expect your ayment to increase or decrease because of a modification to the terms of your mortgage'	?	
	<b>√</b> No.			
	☐Yes.	Explain here:		

riii iii triis iriioimat	ion to identify your cas	e.	Document	Paye 34 01 48	25/17 13:17:54 	Desc Main
Debtor 1	Zdzislaw		Kolach			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name	_		
United States Ban	kruptcy Court for the:	North	nern District of Illinois			
Case number				_		☐ Check if this is an
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Summary	v of Your A	Assets ar	nd Liabilitie	es and Cert	ain Statisti	cal
Informati	•	.ccctc a.			an otation	ou.
	OH					

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct i schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$218,801.50
1b. Copy line 62, Total personal property, from Schedule A/B	\$15,718.00 \$234,519.50
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$415,827.27
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	<b>+</b> \$51,831.00
Part 3: Summarize Your Income and Expenses	\$467,658.27
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$4,666.67
5. Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J	\$9,014.55

12/15

Filed 01/25/17 Entered 01/25/17 13:17:54 Desc Main December 1 Page 35 of 49 Case 17-02156 Doc 1

Zdzislaw First Name

Middle Name

Last Name

Part 4: Answer These Questions for Administrative and Statistical Records		
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court will Yes	ith your other schedules.	
<ul> <li>7. What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. §</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this form to the court with your other schedules.</li> </ul>	§ 159.	
8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	al	\$4,666.00
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
From Part 4 on Schedule E/F, copy the following:	Total Gaini	
9a. Domestic support obligations (Copy line 6a.)	\$0.00	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
9d. Student loans. (Copy line 6f.)	\$31,739.00	
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+</b> \$0.00	
9g. <b>Total</b> . Add lines 9a through 9f.	\$31,739.00	

	tion to identify your cas	o <del>c</del> .					
Debterd	• •		Document	Paye 30 01 49			
Debtor 1	Zdzislaw First Name	Middle Name	Kolach Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Ban	kruptcy Court for the:	North	nern District of Illinois				
Case number							
(if known)				_		Check if this is an amended filing	
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Official Fo	rm 106Dec						
Declarat	ion About	an Individ	dual Debto	r's Schedules			12/15
If two married peo	ple are filing togethe	r, both are equally re	esponsible for supplyi	ng correct information.			
				edules. Making a false statem 250,000, or imprisonment for		roperty, or obtaining mon	ey or
property by fraud i years, or both. 18 U		oankruptcy case car		edules. Making a false statem 250,000, or imprisonment for		roperty, or obtaining mon	ey or
property by fraud i years, or both. 18 U Sign	in connection with a l I.S.C. §§ 152, 1341, 15 Below	pankruptcy case car 19, and 3571.		:250,000, or imprisonment for		roperty, or obtaining mon	ey or
property by fraud i years, or both. 18 U Sign	in connection with a l I.S.C. §§ 152, 1341, 15 Below	pankruptcy case car 19, and 3571.	n result in fines up to \$	:250,000, or imprisonment for		roperty, or obtaining mon	ey or
property by fraud i years, or both. 18 U Sign Did you pay or	in connection with a l I.S.C. §§ 152, 1341, 15 Below agree to pay someor	pankruptcy case car 19, and 3571.	n result in fines up to \$	:250,000, or imprisonment for	up to 20		

Date\_

MM/ DD/ YYYY

Date 01/24/2017

MM/ DD/ YYYY

in this informati	ion to identity your cas		Document	Page 37 01 49			
otor 1	Zdzislaw		Kolach	. ago 0. oo			
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ouse, if filing)	First Name	Middle Name	Last Name				
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atemer	 nt of Finar	ncial Affa	irs for Indiv	iduals Filing	for Bankı	ruptcy	(
				both are equally responsible			sna
				rite your name and case nu			•
rt 1: Give D	Details About You	ur Marital Statu	us and Where You L	ved Before			
		_					
-	current marital status	?					
Married							
Not married	d						
		ed anywhere other	than where you live now	?			
Ouring the last ✓ No	3 years, have you lived	-	Do not include where you  Dates Debtor 1 lived			Dates Debtor there	2 liv
During the last  No Yes. List all 0	3 years, have you lived	-	Do not include where you	live now.		Dates Debtor there	2 liv
During the last  No Yes. List all 0	3 years, have you lived	-	Do not include where you  Dates Debtor 1 lived	live now.			
During the last  No Yes. List all 0	3 years, have you lived	-	Do not include where you  Dates Debtor 1 lived there	live now.  Debtor 2:		there	otor
During the last  No Yes. List all 0  Debtor 1:	3 years, have you lived	-	Do not include where you  Dates Debtor 1 lived there  From	live now.  Debtor 2:		there  Same as Del From	otor
During the last  No Yes. List all 0  Debtor 1:	of the places you lived	-	Do not include where you  Dates Debtor 1 lived there	Debtor 2:  Same as Debtor 1		there	otor
During the last  No Yes. List all 0  Debtor 1:	of the places you lived	-	Do not include where you  Dates Debtor 1 lived there  From	Debtor 2:  Same as Debtor 1		there  Same as Del From	otor
During the last  No Yes. List all 0  Debtor 1:	of the places you lived	-	Do not include where you  Dates Debtor 1 lived there  From	Debtor 2:  Same as Debtor 1	State ZIP C	there  Same as Del From To	otor
Ouring the last  ✓ No  Yes. List all o  Debtor 1:  Number St	of the places you lived	l in the last 3 years. I	Do not include where you  Dates Debtor 1 lived there  From	Debtor 2:  Same as Debtor 1  Number Street	State ZIP C	there  Same as Del From To	otor
Ouring the last  ✓ No  Yes. List all o  Debtor 1:  Number St	of the places you lived	l in the last 3 years. I	Do not include where you  Dates Debtor 1 lived there  From To	Debtor 2:  Same as Debtor 1  Number Street  City	State ZIP C	there  Same as Del From To  Code  Same as Del	otor
Ouring the last  ✓ No  Yes. List all o  Debtor 1:  Number St	of the places you lived	l in the last 3 years. I	Do not include where you  Dates Debtor 1 lived there  From To From	Debtor 2:  Same as Debtor 1  Number Street  City	State ZIP C	there  Same as Del From To  Code  Same as Del From	otor
Ouring the last  ✓ No  Yes. List all o  Debtor 1:  Number St	of the places you lived	l in the last 3 years. I	Do not include where you  Dates Debtor 1 lived there  From To	Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1	State ZIP C	there  Same as Del From To  Code  Same as Del	otor
Ouring the last  ✓ No  Yes. List all o  Debtor 1:  Number St	of the places you lived	l in the last 3 years. I	Do not include where you  Dates Debtor 1 lived there  From To From	Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1	State ZIP C	there  Same as Del From To  Code  Same as Del From	otor
Ouring the last  ✓ No  Yes. List all o  Debtor 1:  Number St	of the places you lived treet  Sta	l in the last 3 years. I	Do not include where you  Dates Debtor 1 lived there  From To From	Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1	State ZIP C	there  Same as Del From To  Code  Same as Del From To To	otor
During the last  ✓ No  Yes. List all o  Debtor 1:  Number St  City	of the places you lived treet  Sta	I in the last 3 years. I	Do not include where you  Dates Debtor 1 lived there  From To From	Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  Number Street		there  Same as Del From To  Code  Same as Del From To To	otor
During the last  ✓ No  Yes. List all o  Debtor 1:  Number St  City	of the places you lived treet  Sta	I in the last 3 years. I	Do not include where you  Dates Debtor 1 lived there  From To From	Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  Number Street		there  Same as Del From To  Code  Same as Del From To To	otor
During the last  ✓ No  Yes. List all o  Debtor 1:  Number St  City  Number St	of the places you lived treet  Sta	ate ZIP Code	Do not include where you  Dates Debtor 1 lived there  From To  From To	Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  Number Street	State ZIP C	there  Same as Del From To  Code  Same as Del From To  Code	otor

☐ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Gase 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: Page 38 of 49

Did you have any income from employmer Fill in the total amount of income you receive If you are filing a joint case and you have inco  No  Yes. Fill in the details.	d from all jobs and all business	es, including part-time activiti	es.	
	Debtor 1		Debtor 2	
	Sources of income	Gross Income	Sources of income	Gross Income
	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$3,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
	✓ Operating a business		Operating a business	
For last calendar year: (January 1 to December 31, 2016)	☐ Wages, commissions, bonuses, tips	\$56,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
YYYY	☑ Operating a business		Operating a business	
For the calendar year before that: (January 1 to December 31, 2015)	☑ Wages, commissions, bonuses, tips	\$60,516.00	☐ Wages, commissions, bonuses, tips	\$0.00
(eariaar) : to 2 ccorrisor o :, <u>20 to</u> )				
Did you receive any other income during the nclude income regardless of whether that incomyments; pensions; rental income; interest; on ave income that you received together, list it	come is taxable. Examples of or dividends; money collected from	ther income are alimony; child		
Did you receive any other income during the nclude income regardless of whether that incomy incomes; pensions; rental income; interest; anave income that you received together, list it list each source and the gross income from any No	his year or the two previous ca come is taxable. Examples of or dividends; money collected fror only once under Debtor 1.	ther income are alimony; child in lawsuits; royalties; and gam	support; Social Security, uner	
Did you receive any other income during the notice income regardless of whether that income mayments; pensions; rental income; interest; anave income that you received together, list it that each source and the gross income from a No	his year or the two previous ca come is taxable. Examples of or dividends; money collected fror only once under Debtor 1.	ther income are alimony; child in lawsuits; royalties; and gam	support; Social Security, uner	
Pid you receive any other income during the notude income regardless of whether that incoments; pensions; rental income; interest; ave income that you received together, list it ist each source and the gross income from a	nis year or the two previous cannot be standard to the standar	ther income are alimony; child in lawsuits; royalties; and game include income that you listed Gross income from each	support; Social Security, uner abling and lottery winnings. If y d in line 4.  Debtor 2  Sources of income	ou are filing a joint case and
Pid you receive any other income during the notude income regardless of whether that incoments; pensions; rental income; interest; ave income that you received together, list it ist each source and the gross income from a	nis year or the two previous ca come is taxable. Examples of or dividends; money collected fror only once under Debtor 1. each source separately. Do not	ther income are alimony; child in lawsuits; royalties; and game include income that you listed	support; Social Security, unerabling and lottery winnings. If y d in line 4.	ou are filing a joint case and
Did you receive any other income during the notude income regardless of whether that incoments; pensions; rental income; interest; clave income that you received together, list it is each source and the gross income from the order of the composition of the com	nis year or the two previous cannot be standard to the standar	ther income are alimony; child in lawsuits; royalties; and game include income that you listed.  Gross income from each source (before deductions and	support; Social Security, uner abling and lottery winnings. If y d in line 4.  Debtor 2  Sources of income	Gross Income from eac csoure (before deductions and
Did you receive any other income during the include income regardless of whether that incoments; pensions; rental income; interest; ave income that you received together, list it ist each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the	nis year or the two previous cannot be standard to the standar	ther income are alimony; child in lawsuits; royalties; and game include income that you listed.  Gross income from each source (before deductions and	support; Social Security, uner abling and lottery winnings. If y d in line 4.  Debtor 2  Sources of income	Gross Income from eac csoure (before deductions and
Did you receive any other income during the include income regardless of whether that include income regardless of whether that include income regardless of whether that include ayments; pensions; rental income; interest; ave income that you received together, list it ist each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	nis year or the two previous cannot be standard to the standar	ther income are alimony; child in lawsuits; royalties; and game include income that you listed.  Gross income from each source (before deductions and	support; Social Security, uner abling and lottery winnings. If y d in line 4.  Debtor 2  Sources of income	Gross Income from eac csoure (before deductions and
Did you receive any other income during the notude income regardless of whether that incopayments; pensions; rental income; interest; of the payments of the notation of the n	nis year or the two previous cannot be standard to the standar	ther income are alimony; child in lawsuits; royalties; and game include income that you listed.  Gross income from each source (before deductions and	support; Social Security, uner abling and lottery winnings. If y d in line 4.  Debtor 2  Sources of income	Gross Income from eac csoure (before deductions and
Did you receive any other income during the notude income regardless of whether that incoments; pensions; rental income; interest; chave income that you received together, list it dist each source and the gross income from the last Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:	nis year or the two previous cannot be standard to the standar	ther income are alimony; child in lawsuits; royalties; and game include income that you listed.  Gross income from each source (before deductions and	support; Social Security, uner abling and lottery winnings. If y d in line 4.  Debtor 2  Sources of income	Gross Income from eac csoure (before deductions and

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iret Nama	Mid	dle Name	Document	Page 39 c

Are eithe	er Debtor 1	's or Debtor 2's debts primarily	consumer debts?					
□No.	individua	Debtor 1 nor Debtor 2 has prin Il primarily for a personal, family, ne 90 days before you filed for ba	or household purpose."			_	01(8) as "in	curred by an
	_	So to line 7.	and you pay an	y ordanor a total or q	0,420 01	more:		
	☐Yes.	List below each creditor to who creditor. Do not include paym payments to an attorney for this to adjustment on 4/01/19 and e	ents for domestic suppor s bankruptcy case.	t obligations, such a	ıs child sı	upport and alimo	ony. Also, do	
<b>√</b> Yes.	Debtor 1	or Debtor 2 or both have prin	narily consumer debts.					
	During th	ne 90 days before you filed for ba	ankruptcy, did you pay an	y creditor a total of \$	600 or m	ore?		
	Yes.	So to line 7.  List below each creditor to who payments for domestic supporthis bankruptcy case.						
			Dates of payment	Total amount p	aid	Amount you	still owe	Was this payment for
		uy, Stanley 's Name		\$5,9	52.93	\$	32,062.00	<b>√</b> Mortgage ☐ Car
		Christina Dr	November 01, 2016					☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors
	<u>Hickor</u> City	y Hills, IL 60457 State ZIP Cod	<u>January 01, 2017</u> de					Other
		's Name	<u>Jan 07, 2017</u>	\$1,3	<u>311.00</u>	\$	12,399.00	☐ Mortgage ☐ Car
	PO Box Number	x 901003 Street	Dec 07, 2016  Nov 07, 2016					☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors
	Ft Wor	th, TX 76101 State ZIP Cod	<del>de</del>					Other
<i>Insiders</i> officer, di proprieto	include you irector, per	re you filed for bankruptcy, did ur relatives; any general partners son in control, or owner of 20% c. § 101. Include payments for de	s; relatives of any genera or more of their voting se	l partners; partnersl ecurities; and any m	nips of whanaging	nich you are a go agent, including	eneral partn	er; corporations of which you are usiness you operate as a sole
<b>√</b> No ☐Yes. L	₋ist all payr	nents to an insider.						

Page 40 of 49 Middle Name Insider's Name Number Street City State ZIP Code Insider's Name Number Street City State ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. **√**No ☐ Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still owe Reason for this payment payment Include creditor's name Insider's Name Number Street ZIP Code City State Insider's Name Number Street City State ZIP Code Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. □No Yes. Fill in the details.

**,17-02156** 

Debtor 1

Doc 1

Filed 01/25/17

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Gase 17-021	56 Doc 1			13:57.54 <sup>mbe</sup> Desc Main
First Name	Middle Name	DQGJIMANT	Page 41 of 49	

Case title BMO Harris Bank NA v			Court or agency		Status of the case
	Mortgage I	Foreclosure	Circuit Court of Co	ok County, Illinois	<b>✓</b> Pending
olach, et al			Court Name		On appeal
Case number 2016 CH 15805			50 W. Washington Street	St.	Concluded
			Chicago, IL 60602 City	State ZIP Code	
	Divorce		J.,	2 2000	
Case title In re the Marriage of Kolach	Divoice		Circuit Court of Co	ok County	Pending
Case number 2016 D5 30477					☐ On appeal☐ Concluded☐
			Number Street		
			City	State ZIP Code	
Yes. Fill in the information below.					
		Describe the property	у	Date	Value of the property
		_			
Creditor's Name					
		Explain what happen	ed		
Number Street		Explain what happen	Cu		
Number Street		☐ Property was reposs	sessed.		
Number Street		Property was reposs	sessed.		
Number Street  City State	ZIP Code	☐ Property was reposs	sessed. osed. hed.		
	ZIP Code	Property was reposs Property was foreclo Property was garnis Property was attache	sessed. osed. hed. ed, seized, or levied.	Date	Value of the property
	ZIP Code	Property was reposs Property was foreclo	sessed. osed. hed. ed, seized, or levied.	Date	Value of the property
	ZIP Code	Property was reposs Property was foreclo Property was garnis Property was attache	sessed. osed. hed. ed, seized, or levied.	Date	Value of the property
City State	ZIP Code	Property was reposs Property was foreclo Property was garnis Property was attache	sessed. osed. hed. ed, seized, or levied.	Date	Value of the property
City State  Creditor's Name	ZIP Code	Property was reposs Property was foreclo Property was garnis Property was attache  Describe the property	sessed. psed. hed. ed, seized, or levied.  y	Date	Value of the property
City State  Creditor's Name	ZIP Code	Property was reposed Property was foreclosty Property was garnisty Property was attached Property was attached Property was reposed Property was reposed Property was foreclosty.	sessed. osed. hed. ed, seized, or levied.  y  ed sessed. sessed. osed.	Date	Value of the property
City State  Creditor's Name	ZIP Code	Property was reposed Property was forecld Property was garnis Property was attached Property was attached Property was attached Property Property Property was reposed Property Property Was reposed Property Property Was reposed Property Property Was reposed Property Property Property Was reposed Property Propert	sessed. psed. hed. ed, seized, or levied.  y  ed  sessed. psed. psed. hed.	Date	Value of the property

Debtor 1 Case 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: 4 P. Standard Page 42 of 49

	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name			
Number Street	_		
	Last 4 digits of account number: XXXX		
City State ZIP Code	_ Last 4 digite of decedit Hambel. 70000		
Nithin 1 year before you filed for bankruptcy, was custodian, or another official?	any of your property in the possession of an assignee for t	he benefit of credito	rs, a court-appointed rec
<b>1</b> No			
Yes			
5: List Certain Gifts and Contribution			
5. List certain dirts and contribution			
ithin O hafana filad fan handumta did	was about the with a total value of many than \$600 and	2	
	you give any gifts with a total value of more than \$600 per p	erson?	
No Yes. Fill in the details for each gift.			
	Describe the office	D-1	Malara
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City State ZIP Code			
Person's relationship to you			
Gifts with a total value of more than \$600 per	Describe the gifts	Dates you gave	Value
person		the gifts	
Person to Whom You Gave the Gift			
Totali ta Wilain Tad Sava tila Siit			
Number Street			
City State ZIP Code			
City State ZIP Code  Person's relationship to you	d you give any gifts or contributions with a total value of mo	re than \$600 to any o	charity?

Gase 17-	02156	Doc 1	Filed 01/25/17	Entered 01/25/17	13:97.574 <sup>mbe</sup> Desc <sup>w</sup> Main
First Name	Mic	ldle Name	Dogunaent	Page 43 of 49	

total more than \$600	at Describe what you contributed	Date you contributed	Value
Charity's Name			
Number Street			
City State ZIP Code			
6: List Certain Losses			
	untarray airea var filad fay haylungay did yay laga anything l	haanua of thaft five othe	u disector or combling?
Inthin 1 year before you filed for bankru INo	ptcy or since you filed for bankruptcy, did you lose anything l	because of theπ, fire, othe	er disaster, or gambling?
Yes. Fill in the details.			
Describe the property you lost and	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		
7: List Certain Payments or T	ransfers		
fithin 1 year before you filed for bankru ankruptcy or preparing a bankruptcy p clude any attorneys, bankruptcy petition	iptcy, did you or anyone else acting on your behalf pay or trans		ne you consulted about s
Tithin 1 year before you filed for bankru ankruptcy or preparing a bankruptcy p clude any attorneys, bankruptcy petition No Yes. Fill in the details.	uptcy, did you or anyone else acting on your behalf pay or transetition?	your bankruptcy.  Date payment or	ne you consulted about so
Tithin 1 year before you filed for bankru ankruptcy or preparing a bankruptcy petition No Yes. Fill in the details.  Thomas T. Boundas & Associates	uptcy, did you or anyone else acting on your behalf pay or transetition? preparers, or credit counseling agencies for services required in y	your bankruptcy.  Date payment or transfer was made	Amount of payment
Fithin 1 year before you filed for bankruptcy or preparing a bankruptcy pelude any attorneys, bankruptcy petition  No Yes. Fill in the details.  Thomas T. Boundas & Associates Person Who Was Paid 6428 Joliet Rd.	uptcy, did you or anyone else acting on your behalf pay or transetition? preparers, or credit counseling agencies for services required in y	your bankruptcy.  Date payment or	Amount of payment
Tithin 1 year before you filed for bankru ankruptcy or preparing a bankruptcy petition clude any attorneys, bankruptcy petition No Yes. Fill in the details.  Thomas T. Boundas & Associates Person Who Was Paid 6428 Joliet Rd. Number Street  Countryside, IL 60525	ptcy, did you or anyone else acting on your behalf pay or transetition? preparers, or credit counseling agencies for services required in your behalf pay or transferred  Description and value of any property transferred	your bankruptcy.  Date payment or transfer was made	Amount of payment
Tithin 1 year before you filed for bankru ankruptcy or preparing a bankruptcy petition clude any attorneys, bankruptcy petition No Yes. Fill in the details.  Thomas T. Boundas & Associates Person Who Was Paid 6428 Joliet Rd. Number Street  Countryside, IL 60525	ptcy, did you or anyone else acting on your behalf pay or transetition? preparers, or credit counseling agencies for services required in your behalf pay or transferred  Description and value of any property transferred	your bankruptcy.  Date payment or transfer was made	Amount of payment
Aithin 1 year before you filed for bankru ankruptcy or preparing a bankruptcy pelude any attorneys, bankruptcy petition  No Yes. Fill in the details.  Thomas T. Boundas & Associates Person Who Was Paid  6428 Joliet Rd. Number Street  Countryside, IL 60525	ptcy, did you or anyone else acting on your behalf pay or transetition? preparers, or credit counseling agencies for services required in your behalf pay or transferred  Description and value of any property transferred	your bankruptcy.  Date payment or transfer was made	

Gase 17	-02156	Doc 1			13:97.54 <sup>mbe</sup> Desc Main
First Name	Mid	ldle Name	Document	Page 44 of 49	

	Description and value of any property train	nsferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				
Number Street				
City State ZIP Code				
Email or website address	-			
Person Who Made the Payment, if Not You	-			
Ideal with your creditors or to make payment Do not include any payment or transfer that your No  ☐ Yes. Fill in the details.	ccy, did you or anyone else acting on your be nts to your creditors? ou listed on line 16.  Description and value of any property trai			Amount of payment
	_	isicircu	transfer was made	Amount or payment
Person Who Was Paid				
Number Street				
City State ZIP Code	_			
ourse of your business or financial affairs	made as security (such as the granting of a se			y transferred in the ord
☑Yes. Fill in the details.	Description and value of property transferred	Describe any propor debts paid in ex	erty or payments receive cchange	d Date transfer was made
Yes. Fill in the details.				
Yes. Fill in the details.  Person Who Received Transfer				

18.

First Name Mic	Doc 1 File 121/25/17      Doc 1 File 2 25/17	age 45 of 49	13: <u>47°:54<sup>mbe</sup>rDésc*/N</u>	
The raine with	- Last Haine			
Person Who Received Transfer				
Number Street	_			
	_			
City State ZIP Code	9			
Person's relationship to you	-			
Within 10 years before you filed for barn often called asset-protection devices.)  ☑ No ☐ Yes. Fill in the details.	kruptcy, did you transfer any property to	a self-settled trust or simila	r device of which you are a b	eneficiary?(These
	Description and value of the proper	ty transferred		Date transfer was made
Name of trust	_			
-				
	ounts, Instruments, Safe Deposit			sold, moved, or
	ket, or other financial accounts; certificate other financial institutions.	es of deposit; shares in bar	nks, credit unions, brokerage	e houses, pension
		es of deposit; shares in bar	nks, credit unions, brokerage	e houses, pension
funds, cooperatives, associations, and		es of deposit; shares in bar	nks, credit unions, brokerage	e houses, pension
funds, cooperatives, associations, and ☑No		es of deposit; shares in bar  Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing o
funds, cooperatives, associations, and ☑No	other financial institutions.	Type of account or	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and  No Yes. Fill in the details.  Name of Financial Institution	Last 4 digits of account number	Type of account or instrument  Checking Savings	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and  ✓ No  ☐ Yes. Fill in the details.	Last 4 digits of account number	Type of account or instrument  Checking Savings Money market	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and  No Yes. Fill in the details.  Name of Financial Institution	Last 4 digits of account number	Type of account or instrument  Checking Savings Money market Brokerage	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and  No Yes. Fill in the details.  Name of Financial Institution	Last 4 digits of account number  XXXX	Type of account or instrument  Checking Savings Money market	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and No No Yes. Fill in the details.  Name of Financial Institution  Number Street	Last 4 digits of account number  XXXX	Type of account or instrument  Checking Savings Money market Brokerage	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and No Yes. Fill in the details.  Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution	Last 4 digits of account number  XXXX	Type of account or instrument  Checking Savings Money market Brokerage Other  Checking Savings	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and No No Yes. Fill in the details.  Name of Financial Institution  Number Street  City State ZIP Code	Last 4 digits of account number  XXXX	Type of account or instrument  Checking Savings Money market Brokerage Other Checking Savings Money market	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and No No Yes. Fill in the details.  Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution	Last 4 digits of account number  XXXX	Type of account or instrument  Checking Savings Money market Brokerage Other Savings Money market	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and No Yes. Fill in the details.  Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution  Number Street	Last 4 digits of account number  XXXX-	Type of account or instrument  Checking Savings Money market Brokerage Other Checking Savings Money market	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and No Yes. Fill in the details.  Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution	Last 4 digits of account number  XXXX-	Type of account or instrument  Checking Savings Money market Brokerage Other Savings Money market	Date account was closed, sold, moved, or	Last balance before closing of
funds, cooperatives, associations, and No Yes. Fill in the details.  Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution  Number Street	Last 4 digits of account number  XXXX-	Type of account or instrument  Checking Savings Money market Brokerage Other Savings Money market Brokerage Other Other Other	Date account was closed, sold, moved, or transferred	Last balance before closing of transfer
funds, cooperatives, associations, and No Yes. Fill in the details.  Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution  Number Street	Last 4 digits of account number  XXXX-  XXXXX-  XXXX-  XXXX-  XXXX-  XXXX-  XXXX-  XXXX-  XXXX-  XXXX-  XXXXX-  XXXXXX	Type of account or instrument  Checking Savings Money market Brokerage Other Savings Money market Brokerage Other Other Other	Date account was closed, sold, moved, or transferred	Last balance before closing of transfer

Case 17-02156 Doc 1 Debtor 1

	Who else had access to it?	Describe the contents	Do you still have it?
			□No
Name of Financial Institution	Name		Yes
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code			
<ul><li>22. Have you stored property in a storage unit o</li><li>☑ No</li><li>☑ Yes. Fill in the details.</li></ul>	r place other than your home within 1 year before	you filed for bankruptcy?	
	Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name		□ No □ Yes
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code  Part 9: Identify Property You Hold of  23. Do you hold or control any property that son  ✓ No	or Control for Someone Else neone else owns? Include any property you borro	wed from, are storing for, or hold in trust for s	omeone.
Yes, Fill in the details.			
	Where is the property?	Describe the property	Value
Owner's Name	Number Street		
Owner's Name  Number Street	Number Street		
	Number Street  City State ZIP Code		
Number Street	City State ZIP Code		
Number Street  City State ZIP Code	City State ZIP Code		
Number Street  City State ZIP Code  Part 10: Give Details About Environ  For the purpose of Part 10, the following definition  Environmental law means any federal, state	City State ZIP Code		

- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

btor 1	Gasew17-02156 First Name Mid	Doc 1 Filed 91/25/17  Document F	Entered 01/25/17 13:17*554**********************************	iesc Main
√No		at you may be liable or potentially liable und	der or in violation of an environmental law?	
☐Yes. Fill i	n the details.	Governmental unit	Environmental law, if you know it	Date of notice
Name of si	ito	Covernmental unit	_	
Name or Si	ne	Governmental unit		
Number	Street	Number Street	_	
		City State ZIP Code	_	
City	State ZIP Code	<del></del>		
√No		any release of hazardous material?		
Yes. Fill I	n the details.	Governmental unit	Environmental law, if you know it	Date of notice
Name of si	ite	Governmental unit	_	
Number	Street	Number Street		
		City State ZIP Code	_	
City	State ZIP Code			
√No		Iministrative proceeding under any environ	nmental law? Include settlements and orders.	
Yes. Fill i	n the details.	Court or agency	Nature of the case	Status of the cas
		<b>0</b>		
Case title		Court Name	_	☐Pending ☐On appeal
		Number Street	_	☐ Concluded
Case num	ber	City State ZIP Code		
rt 11: Giv	a Datails About Your B	usiness or Connections to Any F	Rusiness	
Within 4 yea  A so A m  A pa  An  An  An  An  An  An  An  An  An  A	rs before you filed for bankrup ole proprietor or self-employed nember of a limited liability cor artner in a partnership officer, director, or managing o	d in a trade, profession, or other activity, einpany (LLC) or limited liability partnership executive of a corporation ting or equity securities of a corporation	the following connections to any business?	

Gase 17-02156 Doc 1 Filed 01/25/17 Entered 01/25/17 13: 97.534 Main First Name Middle Name Document Page 48 of 49

		Employer Identification number
Blackhawk Express Inc	Describe the nature of the business	Do not include Social Security number or ITIN.
Name	Trucking Company	
8923 W 93RD PL		EIN: <u>2 7 - 1 2 2 7 3 6 5</u>
Number Street	-	
	Name of accountant or bookkeeper	Dates business existed
	-	
15 1 15 1 10 10 15 7		FromTo
Hickory Hills, IL 60457 City State ZIP Code	-	
ony once in odde		
	Describe the nature of the business	Employer Identification number
Name	_	Do not include Social Security number or ITIN.
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	Name of accountant or bookkeeper	Dates business existed
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City State ZIP Code  Vithin 2 years before you filed for bankruptcy, arties.		FromTo our business? Include all financial institutions, creditors, or other
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Debtor 1	Case 17-0215 First Name	56 Doc 1  Middle Name	Filed Q1/25/17 Document	Entered 01/25/17 Page 49 of 49	13:97:54 <sup>mbe</sup> Desc/Main
Did you at	ttach additional pages to	Your Statement o	of Financial Affairs for Inc	lividuals Filing for Bankruptc	y (Official Form 107)?
✓No					
Yes					
Did you pa	ay or agree to pay someo	ne who is not an a	attorney to help you fill ou	t bankruptcy forms?	
<b>√</b> No					
☐Yes. Na	ame of person			<del></del>	Bankruptcy Petition Preparer's Notice, n, and Signature (Official Form 119).